

**COUNTY OF WOODFORD, STATE OF ILLINOIS
APPLICATION FOR ABSENTEE BALLOT**

**Return Application: Woodford County Clerk
115 N. Main Room 202
Eureka, IL 61530**

PRIMARY ELECTION held on **March 18, 2014**

Print: Name, Address, Phone Number & E-Mail

Phone:	E-Mail:

ADDRESS TO WHICH BALLOT IS TO BE MAILED

I state that I am a resident in the precinct and County specified above, that I have lived at said address for 30 days or more preceding this election, that I am lawfully entitled to vote in such precinct at said election to be held and that I wish to vote by absentee ballot.

I hereby make application for an official ballot(s) to be voted by me at such election, and agree that I shall return the ballot(s) to the election official issuing the same prior to the closing of the polls on the date of the election or, if returned by mail, postmarked no later than midnight preceding election day, for counting no later than during the period for counting provisional ballots, the last day which is the 14th day following the election day.

I understand that this application is made for an official absentee ballot or ballots to be voted by me at the election specified in this application and that I must submit a separate application for an official absentee ballot or ballots to be voted by me at any subsequent election.

Under penalties as provided by the law pursuant to 10 ILCS 5/29-10 of the Election Code, the undersigned certifies that the statements set forth in this application are true and correct.

10/22/2013 O:\Election\Elections by Year – Type/Absentee Application 2014

OFFICE USE ONLY

PRECINCT NAME

PRECINCT NUMBER -TAX CODE

VOTER ID NUMBER

BALLOT STYLE

LOG NUMBER

TABULATOR NUMBER

CHECK THE APPROPRIATE BOX BELOW:

- ☐ **ABSENTEE**→ Applies to those who are voting in-person OR via postal mail during the specified period.
- ☐ **GRACE**→ (I have registered or transferred my registration during the period of 27-3 days prior to the election at the office of the election authority or a designated location). I understand that if I cast a grace period ballot that I shall not be permitted to revoke that ballot or vote another ballot with respect to the election.
- ☐ **EARLY**→ I am casting a ballot during the period of 15-3 days prior to the election. I understand that if I cast an early ballot that I shall not be permitted to revoke that ballot or vote another ballot with respect to the election.
- ☐ **NURSING HOME**→ Applies to registered voters who are residents of Nursing Homes wishing to participate in Nursing Home Voting.

DATED _____, 20____

(Signature of Applicant)

(Printed Name of Applicant)

For Primaries Only (Check one):

- ☐ Republican Party Ballot
☐ Democratic Party Ballot
☐ Ballot with **Referenda Only**